

EXHIBIT E



Filing Results

LINDA PAULSELL
ART VAN FURNITURE, INC.
6500 E 14 Mile Rd
Warren, MI 48092-1295

Date: 11/01/2016
Order #: 56094900
Customer #: 34460
Reference 1: 34460
Reference 2: --

Target Name: AVF Franchising, LLC

Jurisdiction: Secretary of State, Indiana

Filing Type: Secured Party Amendment Filing

Searched Through: --

Results: See attached filing acknowledgement

Document Listing:

File #	File Date	Type of Filing
20160000831506	10/17/2016	Amendment

Filing Type: Secured Party Amendment Filing

Searched Through: --

Results: See attached filing acknowledgement

Document Listing:

File #	File Date	Type of Filing
201600008315228	10/17/2016	Amendment

TREVOR HARRIS
Chicago Team 1
208 S. LaSalle Street
Suite 814
Chicago, IL 60604
312.288.3547
trevor.harris@wolterskluwer.com

This report contains information compiled from sources which CT Lien Solutions considers reliable but does not control. The information provided is not a certified record of the applicable jurisdiction unless otherwise indicated. CT Lien Solutions does not (i) warrant or guarantee the accuracy, completion or timeliness of the information provided or (ii) accept any liability for delays, errors or omissions in the information provided. CT Lien Solutions is not an insurer with regard to this information or these services. Under no circumstances shall CT Lien Solutions be liable for any loss of underlying collateral or loss (or decreased priority) of security interest in connection with this information or these services. Any categorization of search results is provided for convenience only and is not to be construed as a legal opinion concerning the status of filings.

**UCC FINANCING STATEMENT AMENDMENT**

State Form 10102 (R275-13)

Approved by State Board of Accountants, 2013

Indiana Secretary of State

Filing Number: 201600008315006

Filing Date : 10/17/2016 17:30:00

FOLLOW INSTRUCTIONS.

NSI-Jeff

A. NAME & PHONE OF CONTACT AT FILER (optional) Robert Anderson (586) 983-2961
B. E-MAIL CONTACT AT FILER (optional) randerson@artvan.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Robert Anderson Art Van Furniture, Inc. 6500 E. 14 Mile Road Warren, Michigan 48092

1A. INITIAL FINANCING STATEMENT FILE NUMBER
201600008001614

1D. THIS FINANCING STATEMENT AMENDMENT is to be filed [or record] (or recorded) in the REAL ESTATE RECORDS.
File: [Amendment Addendum \(Form UCC3e\)](#) and provide Debtor's name in Item 13.

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement.
3. ASSIGNMENT (full or partial): Provide name of Assignee in Item 7a or 7b, and address of Assignee in Item 7c and name of Assignor in Item 8. For partial assignment, complete Items 7 and 9 (ggg) also indicate affected collateral in Item 9.
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

5. PARTY INFORMATION CHANGE:
Check one of these two boxes: AND Check one of these three boxes:
This Change affects Debtor or Secured Party of record CHANGE name and/or address: Complete Item 6a or 6b; and Item 7a or 7b; and Item 7c. ADD name: Complete Item 7b or 7a, and Item 7c. DELETE name: Give record name to be deleted in Item 6a or 6b.

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b).

6a. ORGANIZATION'S NAME
Art Van Furniture, Inc.

6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAMES/INITIAL(S) SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name.)

7a. ORGANIZATION'S NAME
AVF Franchising, LLC

7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAMES/INITIAL(S) SUFFIX

7c. MAILING ADDRESS
6500 E. 14 Mile Road CITY **Warren** STATE **MI** POSTAL CODE **48092** COUNTRY **USA**

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral
Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (8a or 8b) (name of Assignor, if this is an Assignment). If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor.

9a. ORGANIZATION'S NAME
Art Van Furniture, Inc.

9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAMES/INITIAL(S) SUFFIX

10. OPTIONAL FILER REFERENCE DATA:
J.A. Long, Inc.



Filing Results

LINDA PAULSELL
ART VAN FURNITURE, INC.
6500 E 14 Mile Rd
Warren, MI 48092-1295

Date: 11/01/2016
Order #: 55945980
Customer #: 34460
Reference 1: 34460 (Art Van Furniture)
Reference 2: --

Target Name: J.A. Long, Inc.

Jurisdiction: Secretary of State, Indiana

Filing Type: UCC Financing Statement	Searched Through: --
Results: See attached filing acknowledgement	

Document Listing:

File #	File Date	Type of Filing
201600008001614	10/05/2016	Original Financing Statement

Filing Type: Debtor Notification (Indiana Only)	Searched Through: --
Results: See attached filing acknowledgement	

TREVOR HARRIS
Chicago Team 1
208 S. LaSalle Street
Suite 814
Chicago, IL 60604
312.288.3547
trevor.harris@wolterskluwer.com

This report contains information compiled from sources which CT Lien Solutions considers reliable but does not control. The information provided is not a certified record of the applicable jurisdiction unless otherwise indicated. CT Lien Solutions does not (i) warrant or guarantee the accuracy, completion or timeliness of the information provided or (ii) accept any liability for delays, errors or omissions in the information provided. CT Lien Solutions is not an insurer with regard to this information or these services. Under no circumstances shall CT Lien Solutions be liable for any loss of underlying collateral or loss (or decreased priority) of security interest in connection with this information or these services. Any categorization of search results is provided for convenience only and is not to be construed as a legal opinion concerning the status of filings.

**INDIANA SECRETARY OF STATE
UNIFORM COMMERCIAL CODE DIVISION
FILING ACKNOWLEDGMENT**

INDIANA SECRETARY OF STATE
BUSINESS SERVICES DIVISION
302 West Washington Street, Room E018
Indianapolis, IN 46204
<http://www.sos.in.gov>

**NSI
PICK UP
INDIANAPOLIS, IN 46204**

--
Date: 10/6/2016 7:13:34 AM
File Number: 201600008001614
Document Number: N/A
Receipt Number: 251205
Payment Number: 249280

<u>Date / Time Filed</u>	<u>Lapse Date</u>	<u># of Pages</u>
10/5/2016 5:30:00 PM	10/05/2021	2

Filing Type
Initial

Debtor(s)
J.A. LONG, INC. 2634 EAST THIRD STREET BLOOMINGTON, IN 47401

Secured Party(s)
ART VAN FURNITURE , INC. 6500 E. 14 MILE ROAD WARREN, MI 48092

File #: 201600008001614

DCN: 201600008001614

**UCC FINANCING STATEMENT**State Form 50181 (R2 / 5-13)
Approved by State Board of Accountants, 2013Indiana Secretary of State
Filing Number: 201600008001614
Filing Date : 10/05/2016 17:30:00**FOLLOW INSTRUCTIONS.**

NSI-Jeff

A. NAME & PHONE OF CONTACT AT FILER (optional)
Robert Anderson (586) 983-2981
B. E-MAIL CONTACT AT FILER (optional)
randerson@artvan.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
Robert Anderson Art Van Furniture, Inc. 6500 E. 14 Mile Road Warren, Michigan 48092

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY.

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (Use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of Item 1 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad).

1a. ORGANIZATION'S NAME J.A. Long, Inc.				
OR				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 2634 East Third Street	CITY Bloomington	STATE IN	POSTAL CODE 47401	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (Use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of Item 2 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad).

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME OF ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b).

3a. ORGANIZATION'S NAME Art Van Furniture, Inc.				
OR				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 6500 E. 14 Mile Road	CITY Warren	STATE MI	POSTAL CODE 48092	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

SEE EXHIBIT A ATTACHED HERETO AND MADE A PART HEREOF.

5. Check only if applicable and check only one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, Item 17 and Instructions) <input type="checkbox"/> being administered by a Debtor's Personal Representative
6a. Check only if applicable and check only one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility <input type="checkbox"/> Check only if applicable and check only one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessor/Lessee <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailee <input type="checkbox"/> Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT (Form UCC1) (Rev. 04/20/11)

EXHIBIT A
UCC FINANCING STATEMENT

DEBTOR: J.A. Long, Inc.

SECURED PARTY: Art Van Furniture Inc.

All of Debtor's right, title and interest in all personal property of the Debtor including, without limitation:

- (a) All assets of the Debtor, and all of the other following described property in which Debtor now or hereafter acquires an interest in whatever form, and in any and all proceeds thereof, the Franchise Agreement between Debtor and Secured Party dated June 6, 2016, as amended or supplemented, and all rights related thereto, inventory, equipment, fixtures, accounts, deposit accounts, goods, documents, letter-of-credit rights, chattel paper, instruments and general intangibles used in connection with Debtor's Art Van Furniture, Inc. franchise business located at 2634 E. 3rd Street, Bloomington, Indiana (the "Collateral").
- (b) The terms used in this collateral description (whether or not capitalized) to describe the Collateral (whether directly or as part of another defined term) include the meanings ascribed to such terms in Articles 8 or 9 of the Uniform Commercial Code (including any term used in such Articles which are defined in other Articles of the Uniform Commercial Code), except that (i) meaning of such terms will not be limited by reason of any limitation on the scope of the Uniform Commercial Code, by reason of federal preemption or otherwise, and (ii) to the extent the definition of any category or type of Collateral is expanded by any amendment, modification or revision to the Uniform Commercial Code, such expanded definition will apply automatically as the date of such amendment, modification or revisions.